



# DEPARTMENT OF DEVELOPMENT SERVICES

4701 West Russell Road, Las Vegas, NV 89118 \* (702) 455-3000

## COMMERCIAL SUB-PERMIT APPLICATION

PERMIT TYPE (Select One Only)

☐

ELECTRICAL

☐

FIRE ALARM

☐

MECHANICAL

☐

PLUMBING

ASSESSOR PARCEL NO.:

APPLICATION NO.:

JOB SITE ADDRESS:

PROJECT NAME:

GENERAL'S BUILDING PERMIT NO.:

SETUP BY:

TENANT NAME:

SUITE/UNIT NO.:

CONTACT NAME:

PHONE:

CONTACT ADDRESS:

DESCRIPTION OF WORK:

☐

PLANS ATTACHED

☐

NO PLANS

### CONTRACTOR INFORMATION

### CONTRACTOR'S DECLARATION

ST. LIC. NO:

CLASS:

CC BUS. LIC. NO:

CONTRACTOR NAME:

PHONE:

MAILING ADDRESS:

CITY:

STATE:

ZIP:

I hereby certify that I am licensed under the provisions of N.R.S. 624. I certify that I have read this application and state that the information provided is correct. I agree to comply with all County ordinances and state laws relating to building construction, and hereby authorize representatives of Clark County to enter the above referenced property for inspection purposes.

CONTRACTOR SIGNATURE

DATE

### ELECTRICAL

### PRICE / FEE

### MECHANICAL

### PRICE / FEE

### PLUMBING

### PRICE / FEE

Electrical Project Valuation

\$

Mechanical Project Valuation

\$

Plumbing Project Valuation

\$

OR

OR

OR

Percent of Building Permit  
(Electrical Permit Fee – 18%)

Percent of Building Permit  
(Mechanical Permit Fee – 15%)

Percent of Building Permit  
(Plumbing Permit Fee – 16.5%)

COMMENTS:

### PERMIT FEES

Permit Fee: \$

Plan Review Fee:

☐

25%

\$

☐

35%

\$

TOTAL FEE: \$

☐

Cash

☐

Check No:

Zoning Review By: \_\_\_\_\_ Date: \_\_\_\_\_

Bldg Plan Review By: \_\_\_\_\_ Date: \_\_\_\_\_

Issued By: \_\_\_\_\_ Date: \_\_\_\_\_